

CAMPAIGN CONTRIBUTIONS AND EXPENSES REPORT

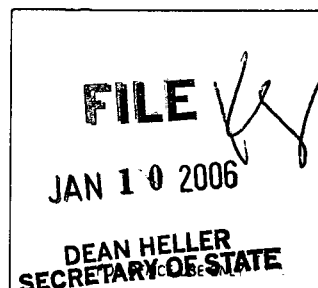
State of Nevada

Nevada Health Care Association Quality First P.A.C.

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 Mailing Address (include city and zip code) executive@nvhca.org Telephone No (702) 434-2273
 E-Mail Address

Select Appropriate Box(es) ☐ CANDIDATE ☒ PAC ☐ BAG ☐ POL PRTY ☐ IND'EXP ☐ NONPROFIT CORP
☐ AMENDED ☒ ANNUAL FILING ☐ PETITIONERS WHO INITIATE/CIRCULATE PETITION & RECEIVE OR EXPEND FUNDS IN EXCESS OF 10K

- ☒ Annual Filing - Due January 15, 2006
 Period: January 1, 2005 - December 31, 2005
- ☐ Report #1 -- Due August 8, 2006*
 Period: Jan. 1, 2006 - Aug 3, 2006
- ☐ Report #2 Due -- October 31, 2006*
 Period: Aug 4, 2006 - Oct 26, 2006
- ☐ Report #3 Due -- January 15, 2007**
 Period: Oct 27, 2006 - Dec 31, 2006
- ☐ Annual Filing - Due January 15, 2007
 Period: January 1, 2006 - December 31, 2006



- * These Reports are filed by Incumbents/candidates running for office in the 2006 election cycle
 ** Third Report suffices for 2007 Annual Filing if candidate also filed Report Nos. 1 and 2

CONTRIBUTIONS SUMMARY

	This Period	Cumulative From Beginning of Report Period #1 through End of This Reporting Period
1. Total Monetary Contributions Received in Excess of \$100 (See page 1 of instruction sheet)	50,585.00	50,585.00
2. Total Monetary Contributions Received of \$100 or Less (See page 2 of instruction sheet)	75.00	75.00
3. Total Monetary Contributions in the form of loans guaranteed by a third party (See page 2 of instruction sheet)	-0-	-0-
4. Total Monetary Contributions in the form of loans that were forgiven (See page 2 of instruction sheet)	-0-	-0-
5. Total Amount of Monetary Contributions Received (Add Lines 1 through 4) (See page 2 of instruction sheet)	50,585.	50,585.
6. Total Amount of Written Commitments for Contributions (When commitment is funded, report as contribution (monetary or in kind)) (See page 2 of instruction sheet)	-0-	-0-
7. Total Value of In Kind Contributions Received in Excess of \$100 (See page 2 of instruction sheet)		

EXPENSES SUMMARY

8. Total Monetary Expenses Paid in Excess of \$100 (See page 2 of instruction sheet)		
9. Total Monetary Expenses Paid of \$100 or Less (See page 2 of instruction sheet)		
10. Total Amount of All Monetary Expenses Paid (Add Lines 8 and 9) (See page 2 of instruction sheet)		
11. Total Value of In Kind Expenses in Excess of \$100 (See page 3 of instruction sheet)	-0-	-0-
12. Disposition of Unspent Contributions (Only reported on Report #3, Annual Report or 15th day of the second month after candidates defeat or Incumbent does not run for reelection) (See page 3 of instruction sheet)		

AFFIRMATION

I Declare Under Penalty of Perjury That the Foregoing is True and Correct.

Signature *Charles Perry*

01-10-2006

Date

